29020202728

FEC FORM 2 STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full)				
				Y OF THE SENAT
Jon Tester			O9 MAY	5 PM 3: 22
(b) Address (number and street	et) 📋 (Check if address changed	2. Identification Number	
709 Son Lane			S6MT00162	
(c) City, State and ZIP Code	A AT		3. Is This New Statement	X Amended
Big Sandy 4. Party Affiliation	MT	59520	(14)	OR 🔼 (A)
DEMOCRATIC PARTY	5. Office Sought Senate		strict of Candidate	
DEMOGRATIO FAITT	Genate	MT 00		
	DESIGNATION OF PR	INCIPAL CAMPAIGN	COMMITTEE	
7. I hereby designate the following na		-	(year of election)	election(s).
		onice iisted in the instruction	ons.	
(a) Name of Committee (in full	1)			
Montanans for Tester				
(b) Address (number and stree	et)			
P.O. Box 1135				
(c) City, State and ZIP Code				
Helena	MT	59624		
3. I hereby authorize the following nar candidacy.	ned committee, which is NOT m	oint Fundraising Representa oy principal campaign committe	•	n behalf of my
NOTE: Inis designation should	I be filed with the principal ca	mpaign committee.		
(a) Name of Committee (in full		mpaign committee.		
(a) Name of Committee (in full)	mpaign committee.		
(a) Name of Committee (in full Ohio Montana Victory Fund)	mpaign committee.		
(a) Name of Committee (in full Ohio Montana Victory Fund (b) Address (number and stree)	mpaign committee.		
(a) Name of Committee (in full Ohio Montana Victory Fund (b) Address (number and stree 426 C Street NE)	mpaign committee.		
(a) Name of Committee (in full Ohio Montana Victory Fund (b) Address (number and stree)	mpaign committee.		
(a) Name of Committee (in full Ohio Montana Victory Fund (b) Address (number and street 426 C Street NE)	mpaign committee.		
(a) Name of Committee (in full Ohio Montana Victory Fund (b) Address (number and street 426 C Street NE (c) City, State and ZIP Code Washington	DC PF INTENT TO EXPENI	20002 D PERSONAL FUNDS	S (House or Senate On	ly)
(a) Name of Committee (in full Ohio Montana Victory Fund (b) Address (number and street 426 C Street NE (c) City, State and ZIP Code Washington	DC PF INTENT TO EXPENI	20002 D PERSONAL FUNDS	S (House or Senate On	ly)
(a) Name of Committee (in full Ohio Montana Victory Fund (b) Address (number and street 426 C Street NE (c) City, State and ZIP Code Washington	DC PF INTENT TO EXPENI Exceeding the threshold amount (20002 D PERSONAL FUNDS see 11 C.F.R. 400.9) by		ly)
(a) Name of Committee (in full Ohio Montana Victory Fund (b) Address (number and stree 426 C Street NE (c) City, State and ZIP Code Washington DECLARATION O	DC PF INTENT TO EXPENI Exceeding the threshold amount (20002 D PERSONAL FUNDS see 11 C.F.R. 400.9) by 0.00	for the primary election, and for the general election.	ly)
(a) Name of Committee (in full Ohio Montana Victory Fund (b) Address (number and stree 426 C Street NE (c) City, State and ZIP Code Washington DECLARATION O I intend to expend personal funds expend of the committee of the co	DC DF INTENT TO EXPENI EXCeeding the threshold amount (9A 9B at funds exceeding the threshold	20002 D PERSONAL FUNDS see 11 C.F.R. 400.9) by 0.00 0.00 amount for either election, you	for the primary election, and for the general election. must enter "0.00" for each.	
(a) Name of Committee (in full Ohio Montana Victory Fund (b) Address (number and stree 426 C Street NE (c) City, State and ZIP Code Washington DECLARATION O I Intend to expend personal funds expen	DC DF INTENT TO EXPENI EXCeeding the threshold amount (9A 9B at funds exceeding the threshold	20002 D PERSONAL FUNDS see 11 C.F.R. 400.9) by 0.00 0.00 amount for either election, you	for the primary election, and for the general election.	
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(a) Name of Committee (in full Ohio Montana Victory Fund (b) Address (number and stree 426 C Street NE (c) City, State and ZIP Code Washington DECLARATION O 3. I intend to expend personal funds expend expend personal funds expend personal	DC DF INTENT TO EXPENI EXCeeding the threshold amount (9A 9B all funds exceeding the threshold examined this Statement and	20002 D PERSONAL FUNDS see 11 C.F.R. 400.9) by 0.00 0.00 amount for either election, you did to the best of my knowled	for the primary election, and for the general election. must enter "0.00" for each. ge and belief it is true, correct Date 04/15/2009	, and complete.
(a) Name of Committee (in full Ohio Montana Victory Fund (b) Address (number and stree 426 C Street NE (c) City, State and ZIP Code Washington DECLARATION O I Intend to expend personal funds expen	DC DF INTENT TO EXPENI EXCeeding the threshold amount (9A 9B all funds exceeding the threshold examined this Statement and	20002 D PERSONAL FUNDS see 11 C.F.R. 400.9) by 0.00 0.00 amount for either election, you did to the best of my knowled	for the primary election, and for the general election. must enter "0.00" for each. ge and belief it is true, correct Date 04/15/2009	, and complete.

PAMELA B. GAVIN SUPERINTENDENT

HART SENATE OFFICE BUILDING SUITE 232 WASHINGTON, DC 20510-2118 PHONE: (202) 224-0322

United States Senate

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